State Report, CRTAC

January 22, 2009

STCC Appointments- 3 year terms

- Lauri Jackson, TC, Benefis- CRTAC
- Justin Grohs, GFES, Great Falls- Private Ambulance Operators
- Jennifer Theusen, TC, Polson- WRTAC
- Fred Bartoletti, TMD, Anaconda- MMA
- Andrew Michel, TMD, Helena- ACEP
- Joe Hansen, Big Timber- ERTAC reappointed
- Brad Vonbergen, TC, Billings Clinic-ERTAC

State Trauma Care Committee

2009

2/9/09

5/11/09

8/10/09

11/02/09

TR 2/10/09

TR 5/12/09

2009 ATLS

March 6 & 7 **April 10 & 11** June 5 & 6 October 9 & 10

Great Falls Billings Missoula Missoula November 6 & 7 Billings

PLUS ATLS Instructor 5/ 2/09 **Billings**



Designation/Verification

Bozeman Deaconess Hospital;
ACS Level III/MT Area Trauma
Hospital

Community Medical Center,

Missoula; ACS Level III/MT Area

Trauma Hospital

MT Designation

Liberty County Hospital, Chester
MTRF

CRTAC facilities to be scheduled:

Pondera Medical Center, Conrad
MTRF

Marias Medical Center, Shelby

MTRF

Montana Designation 19 facilities now designated as Montana Trauma Facilities!!!

Education/Meetings

- Trauma Coordinator meeting 2/10/09,
 Helena Telemed available
- MT/WY Trauma Coordinator meeting 5/12/09- probably Cody, WY
- Montana Trauma System Conference,
 9/16/09- Red Lodge
- Rocky Mountain Rural Trauma
 Symposium 9/17-18, 2009 Red Lodge: ERTAC hosting

Education/Meetings

Rimrock Trauma Conference
5/14/09, Billings
Trauma Solutions: Conference for
Midlevel Practitioners
5/29/09, Missoula

Spring Fever Trauma Conference 5/30/09, Missoula

TEAM

- Courses progressing in WRTAC/ERTAC
- Physician participation still challenging
- STCC & RTACs discussing options of utilizing experienced Midlevels to provide physician-presented content

Montana Health Research and Education Foundation

MHREF Rural Flexibility grant funds available to;

- 1)Support 2 TEAM Courses for CAHs per Trauma Region
- 2) ATLS Tuition Scholarships for 2 MDs/2 Midlevels from CAHs per Trauma Region
- 3) TNCC scholarships for 20 CAH RNs divided into Trauma Regions

Hospital Preparedness

- 56 hospitals participated in Hospital Preparedness Program!
- 820 volunteers in MHMAS Registry
- Anniston Courses;
 Healthcare Leadership- 123
 Hospital Emergency Response Team- 36
 WMD/EMS (HOT course)- 37
 Pandemic Flu Planning- 44

ASPR Grant Funding

Pursue trauma designation or support if recently achieved;

- The Trauma system model maximizes processes for effectively managing resource-intense patients in resource-poor environments
- Trauma designation and continued participation in the trauma system provides hospitals with essential tools for organizing limited essential resources, improving care and expanding capability.

Grant Deliverables

- Pursue Trauma designation:
 - Identification of the Trauma Team members with implementation of a written activation criteria
 - Integration of trauma program processes with NIMS-compliant Emergency Operations Plans

Grant Deliverables

- Mass Fatality Management Plan
- Medical Evacuation/Shelter In Place Plan
- Integrated NIMS compliance
- Trauma Centers:

If designation well-established, support community planning activities around Pan Flu and preparedness

Systems Issues Pediatric Neurosurgery

- Need facility assistance w/identifying issues related to availability of neurosurgery for pediatric patients
- If unavailable, need Regional/local plan to expedite appropriate transfers: all three regions
- All trauma regions looking at prevalence and alternate local plans

Systems Issues

MT Air Medical Issues

NTSB 3-day hearing 2/3/09

"Most Wanted List"

- Transportation Safety Improvements
- Actions Needed by Federal Agencies

The Federal Aviation Administration should:

Improve Safety of Emergency Medical Services Flights;

- Conduct all flights with medical personnel on board in accordance with commuter aircraft regulations.
- Develop and implement flight risk evaluation programs.
- Require formalized dispatch and flight-following procedures including up-to-date weather information.
- Install terrain awareness and warning systems on aircraft.

Systems Issues

- Quantifying System measurable "value"- use data, but data alone
- "Know" Trauma System & Designation improves care: How? What?
- Must show the difference that's made to generate support
- National issue
- NEXT Legislature (2011)
 Additional Trauma Systems funding

RTAC Issues

• ERTAC;

Billings Level II facilities defining mutual "Diversion" language to better serve regional patient needs

Pediatric neurosurgery availability
Regional PI: Pediatric GCS
EMS Trip Reports

RTAC Issues

WRTAC

Need new WRTAC chair,

Nsg Ed: Coordinating care ED through ICU/Floor; how to obtain what patient needs when contacting MD

- RTAC recommendation: All intubated trauma patients have in-line CO2 detectors utilized when device available
- Pediatric neurosurgery availability

When you call MD.....

- Objective clinical data
- Your "gut" feeling
- What are you worried about?
- What do you think needs to be done?
- Remember you ALWAYS have additional resources to utilize: other staff, Charge RN, House supervisor, other MD: be sure additional assistance mechanisms are in place & all understand

Legislation

Legislature 1/5/09-4/25/09

http://laws.leg.mt.gov/laws09/law02
 03w\$.startup

To: "Look up Bill Information"
 To: "Preference List Searching"
 Logon ID – EMSTS
 Password – EMSTS2009
 Preference List – EMS Live